# LIFE INSURANCE PLAN

The Life Insurance Plan offers Basic and Supplemental Life Insurance coverage and Accidental Death and Dismemberment benefits.

## WHO IS ELIGIBLE FOR THE LIFE INSURANCE PLAN?

## **Active Employees**

All regular employees who work at least 20 hours per week are eligible for Basic Life Insurance, Supplemental Life Insurance, and Accidental Death and Dismemberment (AD&D) coverages on the first day of active employment.

## **ENROLLMENT**

Eligible employees must enroll for Basic Life Insurance coverage on their date of hire, and coverage will be effective on their date of hire. Supplemental Life Insurance coverage is optional. You will automatically be enrolled for Basic AD&D coverage when you enroll for Basic Life Insurance Coverage. You will automatically be enrolled for Supplemental AD&D coverage when you enroll for Supplemental Life Insurance coverage. All such coverages will be delayed if the employee is not actively at work. It will begin on the first day that eligibility requirements are met and the employee is actively at work.

To enroll, you must complete an enrollment form and indicate one or more Beneficiaries. Enrollment forms are available through the Benefits Office. By completing the form, you will authorize the necessary payroll premiums for the coverage you select. Eligible employees have 90 days from their date of hire to enroll for Supplemental Life Insurance coverage, and coverage will be effective on the date the enrollment form is signed.

After 90 days, employees may request enrollment, but must submit evidence of insurability and be approved by the Insurance Company before insurance can become effective. If approved, Supplemental Life Insurance coverage will become effective on the date of such approval.

## LIFE INSURANCE PLAN COVERAGE EMPLOYEES UNDER AGE 65

#### Basic Life Insurance Benefits Provided

Basic Life Insurance coverage is provided in an amount equal to the nearest multiple of \$2,500 that exceeds your Annual Base Salary. For part-time employees, coverage is based on the actual part-time Annual Base Salary. Basic Life Insurance coverage is provided at no cost to eligible employees.

# Supplemental Life Insurance Benefits Provided

In addition to Basic Life Insurance coverage, two levels of Supplemental Life Insurance coverage are also available. Supplemental I Life Insurance coverage can be purchased in an amount equal to your Basic Life Insurance coverage. Supplemental II Life Insurance coverage is available in an amount sufficient to make total Life Insurance coverage equal to approximately three times your Annual Base Salary. The total Life Insurance coverage is rounded to the nearest \$500.

## Examples:

An employee whose Annual Base Salary is \$30,000 per year will have Life Insurance coverage available as follows:

Annual Base Salary	Basic	Supplemental	Supplemental	Total
	Insurance	I Insurance	II Insurance	Insurance
\$30,000	\$32,500	\$32,500	\$25,000	\$90,000

If an employee works 20 hours per week, which, in this example, is assumed to be fifty percent of the regular work schedule and has an Annualized Base Salary of \$30,000, Life Insurance coverage is available as follows:

Annualized	Actual Base	Basic	Supplemental	Supplemental	Total
Base Salary	Salary	Insurance	I Insurance	II Insurance	Insurance
\$30,000	\$15,000	\$17,500	\$17,500	\$10,000	

The following schedule outlines the Basic and Supplemental coverage available at various Annual Base Salary levels:

Annual Base Salary	Basic Insurance	Supplemental I Insurance	Supplemental Il Insurance
\$20,000 to \$22,499.99	\$22,500	\$22,500	Additional insurance
\$22,500 to \$24,999.99	\$25,000	\$25,000	to make total coverage from Basic,
\$25,000 to \$27,499.99	\$27,500	\$27,500	Supplemental I, and
\$27,500 to \$29,999.99	\$30,000	\$30,000	Supplemental II equal to
\$30,000 to \$32,499.99	\$32,500	\$32,500	three times Annual Base Salary rounded to the
\$32,500 to \$34,999.99	\$35,000	\$35,000	nearest \$500.

(continues in multiples of \$2,500)

### LIFE INSURANCE PLAN COVERAGE EMPLOYEES AGE 65 OR OVER

#### Basic Life Insurance Benefits Provided

Basic Life Insurance coverage is provided at no cost to eligible employees and is in accordance with the following schedule:

Age	Basic Life Insurance as Percentage of Annual Base Salary
65 to 69	662/3%
70 to 74	45%
75 to 79	30%
80 or over	20%

## Supplemental Life Insurance Benefits Provided

Supplemental I and Supplemental II coverages are available in amounts equal to the Basic Life Insurance coverage amount indicated above. The amount of Basic Life Insurance coverage available is determined as a fraction of Annual Base Salary rounded to the nearest \$500. Examples:

A 65 year-old employee earning \$35,200 per year enrolled in Supplemental I and II would have the following Life Insurance coverage:

Basic	\$23,500
Supplemental I	\$23,500
Supplemental II	\$23,500
Total Life Insurance	\$70,500

A 70 year-old employee earning \$35,200 per year enrolled in Supplemental I and II would have the following Life Insurance coverage:

Basic	\$16,000
Supplemental I	\$16,000
Supplemental II	\$16,000
Total Life Insurance	\$48,000

## MAXIMUM LIFE INSURANCE PLAN COVERAGE

The maximum total life insurance coverage, including supplemental life insurance, is \$1 million. The minimum is \$5,000.

# **OPTION TO ACCELERATE PAYMENT OF DEATH BENEFITS**

If you become terminally ill while insured under this Plan, you may elect Terminal Illness Proceeds. Terminal Illness Proceeds are equal to a minimum of 25% and a maximum of 75% of your total life insurance coverage on the date the Insurance Company receives proof of your terminal illness (but not to exceed \$50,000). Such proceeds may be reduced on account of age. Such benefits are payable to you. Additional conditions apply. One such condition is that your life expectancy is 6 months or less. If you elect this option, your total life insurance coverage at death will be reduced by the Terminal Illness Proceeds.

# ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE Benefits Provided

Accidental Death and Dismemberment (AD&D) Insurance coverage is in addition to Life Insurance coverage and is provided in amounts as follows:

	Annual Base Salary	Basic AD&D Insurance	Supplemental AD&D Insurance*	Total AD&D Insurance	
Ī	Less than \$5,000	\$ 5,000	\$ 5,000	\$10,000	
	\$5,000 to \$7,499.99	\$ 7,500	\$ 7,500	\$15,000	
	\$7,500 to \$9,999.99	\$10,000	\$10,000	\$30,000	
	\$10,000 or over	\$12,500	\$12,500	\$25,000	

<sup>\*</sup>Only provided if you elect Supplemental Life Insurance coverage.

The maximum total AD&D coverage is \$25,000.

This insurance will be paid, regardless of other insurance, for any of the following losses resulting from an accident occurring on or off the job while you are insured:

Loss	AD&D Coverage Amount
Life	100%
One hand by severance at or above the wrist	50%
One foot by severance at or above the ankle	50%
Sight in one eye (entire and irrecoverable)	50%
Speech	50%
Hearing	50%
More than one of the above	100%
Quadriplegia	100%
Paraplegia	75%
Hemiplegia	25%
Thumb and index finger of same hand	25%

No more than 100% of the total coverage amount can be paid.

#### **Exclusions**

AD&D insurance does not cover a loss occurring more than 90 days after the accident, or a loss if it results from any of these:

- 1) Suicide or attempted suicide.
- 2) Intentionally self-inflicted injuries, or any attempt to inflict such injuries.
- 3) Sickness, whether the loss results directly or indirectly from the sickness.
- 4) Medical or surgical treatment of sickness, whether the loss results directly or indirectly from the treatment.
- 5) Any infection. This does not include:
  - a) a pyogenic infection resulting from an accidental cut or wound; or
  - b) a bacterial infection resulting from accidental ingestion of a contaminated substance.
- 6) War, or any act of war. "War" means declared or undeclared war and includes resistance to armed aggression.
- 7) An accident that occurs while the person is serving on full-time active duty for more than 30 days in any armed forces. But this does not include Reserve or National Guard active duty for training.
- 8) Travel or flight in any vehicle used for aerial navigation. This includes getting in, out, on or off any such vehicle. This (8) applies only if:
  - a) the person is riding as a passenger in any aircraft not intended or licensed for the transportation of passengers;
  - b) the person is performing as a pilot or a crew member of any aircraft; or
  - c) you are riding as a passenger in an aircraft owned, leased or operated by your employer.
- 9) Commission of or attempt to commit a felony.
- 10) Being legally intoxicated or under the influence of any narcotic unless administered or consumed on the advice of a doctor.
- 11) Participation in these hazardous sports: bungee jumping; skydiving; parachuting; hang gliding; or ballooning.

### **Additional Benefits**

The additional amount payable for loss of life as a result of an accident in a four wheel vehicle while using a seat belt is the lesser of (a) 10% of the AD&D Coverage amount, and (b) \$10,000. Additional conditions apply.

#### **CLAIMS**

#### How to File a Claim

To file a claim under the Life Insurance Plan, you or a family member must notify the Benefits Office. A claim form, available in the Benefits Office, must be completed and submitted to the Benefits Office with written proof of the loss within 90 days after the date of the loss. The amount of your Life and/or AD&D Insurance will be paid when the Insurance Company receives proof that you died, or were injured while insured for these benefits, and approves the claim.

#### **Questions About Claims**

If you have a question about a Life Insurance Plan claim, you should contact the Benefits Office at (631) 344-7516.

## How to Appeal a Claim

If your claim is denied, you will receive a written notice of the denial from the Insurance Company. The notice will explain the reason for the denial and indicate the review procedures. You may request a review of the denied claim. The request must be submitted in writing to the Insurance Company within 180 days after you receive the denial notice. Submit your request, including your reasons for requesting the review and any additional documents which you believe support your claim. The Insurance Company will review the claim and ordinarily notify you within 45 days of the date your request for review is received. In special cases requiring a delay, the Insurance Company will render a decision no later than 90 days after your request for review is received. If your initial appeal is denied, you may submit a second appeal within 180 days of the date such claim was denied. The Insurance Company has up to 90 days to render a decision.

# **EMPLOYEE PREMIUMS**

Employees who elect Supplemental I or II Life Insurance coverage must pay the required employee premiums (\$0.300 per \$1,000 of coverage). Any change in the amount of your Life Insurance due to a change in your Annual Base Salary will result in an adjustment to your employee premiums.

## **MISCELLANEOUS**

## **Annual Base Salary**

Annual Base Salary is the insured person's annual base salary, before exercise of any salary reduction option, as of the time of the accident or death. Overtime pay and premium pay are not included in Annual Base Salary.

## Assignment of Your Life Insurance and AD&D Benefits

Instead of naming a Beneficiary, you may elect to make an assignment of your Life and AD&D Insurance benefits to your spouse or another designated person. When you assign your benefits to another person, you divest yourself of all ownership rights or interests including the right to change Beneficiaries.

You may obtain additional information and the necessary assignment forms from the Benefits Office.

# **Beneficiary**

In the event of your death, from any cause, your Life Insurance benefits will be paid to the Beneficiary(ies) you have designated. You may designate anyone you wish as a Beneficiary, and you may change your Beneficiary at any time. You may obtain change of beneficiary forms from the Benefits Office.

If there is no Beneficiary at your death, your benefits will be payable to the first of the following: your (a) surviving spouse; (b) surviving child(ren) in equal shares; (c) surviving parents in equal shares; (d) surviving siblings in equal shares; (e) estate. Any assignment you have designated will apply and supercedes the above.

# Changes in the Amount of Life and AD&D Insurance

Any change in the amount of your Life and AD&D Insurance coverages due to a change in your Annual Base Salary will become effective on the date your Annual Base Salary changes. If you are not in active employment on that date, the increase will become effective after you return to active employment for one full day.

You may reduce your Supplemental Life Insurance coverage at any time by completing the required form available in the Benefits Office.

To increase Supplemental Life Insurance coverage, you must complete an enrollment form, submit evidence of insurability and be approved by the Insurance Company before the insurance can become effective. Forms are available in the Benefits Office. If approved, the insurance will become effective on the date of such approval, and you will be required to pay the appropriate employee premiums.

# **Evidence of Insurability**

Evidence of insurability is required if:

- You enroll more than 90 days after you are first eligible for coverage.
- You enroll after your insurance ends because you did not pay a required contribution.
- You want to enroll after obtaining an individual life insurance contract which was from a conversion of your insurance under this policy.
- You have not met a previous evidence requirement to become insured under this policy.

## **General Information**

Information regarding the plan identification number, plan year, plan funding, type of plan, plan sponsor, plan administrator, agent for legal process, your rights under ERISA, prudent actions by plan fiduciaries, modification, suspension, or termination, and privacy of information of the plan can be found in the General Information section of this booklet.

## **Insurance Company**

The Insurance Company is the Prudential Insurance Company of America.

## Leave of Absence

If you are on an approved Leave of Absence, you may continue your Life Insurance coverage during the term of the approved leave from the starting date of your leave by paying the required active employee premiums.

Continuation of insurance is not allowed while on leave for other employment when (1) the other employer offers coverage or (2) the other employer is an agency or prime contractor of the federal government that will cover the employee under its insurance program.

# Participants Receiving Long Term Disability Benefits

Life Insurance coverage will be continued at no cost for employees who qualify for Long Term Disability (LTD) Plan benefits. This coverage will cease when the employee is no longer eligible for LTD Plan benefits.

## **Termination of Coverage**

Life Insurance coverage will cease on the earlier of the date your employment terminates, the date you are no longer eligible for coverage, when you fail to pay the required premiums, or the date the contract with the Insurance Company ends. If coverage has ceased and you die within 31 days after coverage ceased, the benefit amount will still be paid if the claim is approved.

## **CONVERSION**

You are entitled to convert to an individual policy only if (a) your insurance ceases because you are no longer in active employment or no longer eligible for life insurance, (b) your insurance ceases or is reduced because of retirement or age, (c) your insurance is reduced due to a change in your class or amendments of the policy, or (d) the policy is canceled for your class of employees. No medical

examination will be required, but you must submit a completed application form and pay the premium for this coverage to the Insurance Company within 31 days from the date your employment terminates. You may obtain the necessary application form from the Benefits Office.